

POOR LEGIBILITY

ONE OR MORE PAGES IN THIS DOCUMENT ARE DIFFICULT TO READ
DUE TO THE QUALITY OF THE ORIGINAL

65? Reviewed 11/9/85
CPS/Wharen

COVER SHEET: General Motors Parts Division - Doraville
GAD000814343

The General Motors Parts Division - Doraville facility is located at 4060 Motors Industrial Way, Doraville, GA 30360. It is an active auto parts and accessories warehouse and distribution facility that has been owned and operated since opening in 1973 by the GMC Warehousing and Distribution Division of Flint, Michigan, 6060 W. Bristol Road, Flint, Michigan 48554. This facility notified in 1980 and submitted a Part A (Attachment I). At a later date, after clarification of definitions and a modification of plant operations, this facility requested and received a change in status to a Small Quantity Generator (Attachments 4&5). A conversation with Mr. Al Avery, Plant Engineer, revealed that no waste disposal has occurred. All wastes generated at the site are removed by Arivec Chemicals, Inc. (Attachments 2&3). No further action is required at this facility.

MA/mcw015



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
GA D000814343

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site) General Motors Part Division-Doraville		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER 4060 Motors Industrial Way			
03 CITY Atlanta	04 STATE GA	05 ZIP CODE 30360	06 COUNTY DeKalb	07 COUNTY CODE 044	08 CONG DIST 4
09 COORDINATES LATITUDE 33° 54' 40.0"		LONGITUDE 084° 17' 13.0"			
10 DIRECTIONS TO SITE (Starting from nearest public road) From downtown Atlanta proceed north on I-85 to I-285, go north on I-285 to Peachtree Industrial Blvd., exit and turn left (south). Proceed on Peachtree Industrial approximately 1/2 mi. & turn left onto Motors Industrial Way. Site is on right approx-					

III. RESPONSIBLE PARTIES mately 1/8 mile down Motors Industrial Way.

01 OWNER (if known) General Motors Corporation Warehousing and Distribution Division - Flint		02 STREET (Business, mailing, residential) 6060 W. Bristol Road			
03 CITY Flint	04 STATE MI	05 ZIP CODE 48554	06 TELEPHONE NUMBER (313) 635-5474		
07 OPERATOR (if known and different from owner)		08 STREET (Business, mailing, residential)			
09 CITY	10 STATE	11 ZIP CODE	12 TELEPHONE NUMBER ()		
13 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: _____ (Specify) <input type="checkbox"/> G. UNKNOWN					

14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply)
☒ A. RCRA 3001 DATE RECEIVED: 11 13 84 MONTH DAY YEAR ☐ B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: _____ MONTH DAY YEAR ☐ C. NONE

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON-SITE INSPECTION <input type="checkbox"/> YES DATE _____ MONTH DAY YEAR <input checked="" type="checkbox"/> NO		BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify) CONTRACTOR NAME(S): _____			
02 SITE STATUS (Check one) <input checked="" type="checkbox"/> A. ACTIVE <input type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN		03 YEARS OF OPERATION 1973 Present <input type="checkbox"/> UNKNOWN BEGINNING YEAR ENDING YEAR			

04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED
Variety of solvents and other organic and inorganic chemicals stored at facility.

05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION

NONE

V. PRIORITY ASSESSMENT

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents)
☐ A. HIGH (Inspection required promptly) ☐ B. MEDIUM (Inspection required) ☐ C. LOW (Inspect on time available basis) ☒ D. NONE (No further action needed, complete current disposition form)

VI. INFORMATION AVAILABLE FROM

01 CONTACT Mr. Al Avery		02 OF (Agency/Organization) Plant Engineer, GM Parts - Doraville		03 TELEPHONE NUMBER 404 454-5307	
04 PERSON RESPONSIBLE FOR ASSESSMENT Mike Allred		05 AGENCY DNR-EPD	06 ORGANIZATION Remedial Actions Unit	07 TELEPHONE NUMBER (404) 656-7404	08 DATE 12/07/84 MONTH DAY YEAR



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 2 - WASTE INFORMATION

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
GA D000814343

II. WASTE STATES, QUANTITIES, AND CHARACTERISTICS

01 PHYSICAL STATES (Check all that apply)

- ☐ A. SOLID ☐ E. SLURRY
☐ B. POWDER, FINES ☒ F. LIQUID
☐ C. SLUDGE ☐ G. GAS
☐ D. OTHER _____
(Specify)

02 WASTE QUANTITY AT SITE
(Measures of waste quantities
must be independent)

TONS _____
CUBIC YARDS _____
NO. OF DRUMS 27

03 WASTE CHARACTERISTICS (Check all that apply)

- ☒ A. TOXIC ☐ E. SOLUBLE ☐ I. HIGHLY VOLATILE
☒ B. CORROSIVE ☐ F. INFECTIOUS ☐ J. EXPLOSIVE
☐ C. RADIOACTIVE ☒ G. FLAMMABLE ☐ K. REACTIVE
☐ D. PERSISTENT ☒ H. IGNITABLE ☐ L. INCOMPATIBLE
☐ M. NOT APPLICABLE

III. WASTE TYPE

CATEGORY	SUBSTANCE NAME	01 GROSS AMOUNT	02 UNIT OF MEASURE	03 COMMENTS
SLU	SLUDGE			
OLW	OILY WASTE	0.33	MT	Amount Gen. in '83. Avg. is 55kg/mo
SOL	SOLVENTS	5.36	MT	Amount Gen. in '83-Avg. is 894kg/mo
PSD	PESTICIDES			
OCC	OTHER ORGANIC CHEMICALS			
IOC	INORGANIC CHEMICALS			
ACD	ACIDS			
BAS	BASES			
MES	HEAVY METALS			

IV. HAZARDOUS SUBSTANCES (See Appendix for most frequently cited CAS Numbers)

01 CATEGORY	02 SUBSTANCE NAME	03 CAS NUMBER	04 STORAGE/DISPOSAL METHOD	05 CONCENTRATION	06 MEASURE OF CONCENTRATION
SOL	Acetone		Drum Storage		
SOL	Cyclohexanone		Drum Storage		
SOL	Dichlorobenzene	25321-22-6	Drum Storage		
SOL	Dichlorodifluoromethane		Drum Storage		
SOL	Dechloromethane		Drum Storage		
SOL	Ethylacetate		Drum Storage		
OCC	Formaldehyde	50-00-0	Drum Storage		
SOL	Methanol		Drum Storage		
SOL	Methyl Ethyl Ketone		Drum Storage		
SOL	Methyl Ethyl Ketone Peroxide		Drum Storage		
SOL	Methyl Isobutyl Ketone		Drum Storage		
SOL	Tetrachloroethylene		Drum Storage		
OCC	Toluene Diisocyanate		Drum Storage		
SOL	Trichloroethane	25323-89-1			

V. FEEDSTOCKS (See Appendix for CAS Numbers)

CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER	CATEGORY	01 FEEDSTOCK NAME	02 CAS NUMBER
FDS	Toluene	108-88-3	FDS		
FDS	Xylene	1330-20-7	FDS		
FDS			FDS		
FDS			FDS		

VI. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

Part A application filed with GA EPD (Attachment 1).
1983 Generator Annual Hazardous Waste Reports (Attachment 2 & 3).



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
GA D000814343

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☐ A. GROUNDWATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ B. SURFACE WATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ C. CONTAMINATION OF AIR 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ E. DIRECT CONTACT 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ F. CONTAMINATION OF SOIL 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 AREA POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION
(Acres)

01 ☐ G. DRINKING WATER CONTAMINATION 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ H. WORKER EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION

01 ☐ I. POPULATION EXPOSURE/INJURY 02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____ 04 NARRATIVE DESCRIPTION



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
GA D000814343

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (include name(s) of species)

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ M. UNSTABLE CONTAINMENT OF WASTES
(Spills/runoff/standing liquids/leaking drums)

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: _____

IV. COMMENTS

V. SOURCES OF INFORMATION (Cite specific references, e.g., state files, sample analysis, reports)

● SITE LOCATION

DeKalb County
Water Works

Settling

FIGURE 1

CHAMBLEE, GA.

N3352.5—W8415/7.5

1954

PHOTOREVISED 1982

DMA 4151 IV NE—SERIES V845

GEORGIA

QUADRANGLE LOCATION

2

GENERAL MOTORS PARTS DIVISION
DORAVILLE GA D000814343
4060 MOTORS INDUSTRIAL WAY
ATLANTA GA 30360

MOTORS IND. WAY

Doraville

Chamblee

DORAVILLE

DE KALB PEACHTREE
AIRPORT

FIGURE 2

- 4 Receiving Truck Spots
- 14 Shipping Truck Spots
- 6 Receiving Rail Spots @ 50'
- 3 Shipping Rail Spots @ 50'

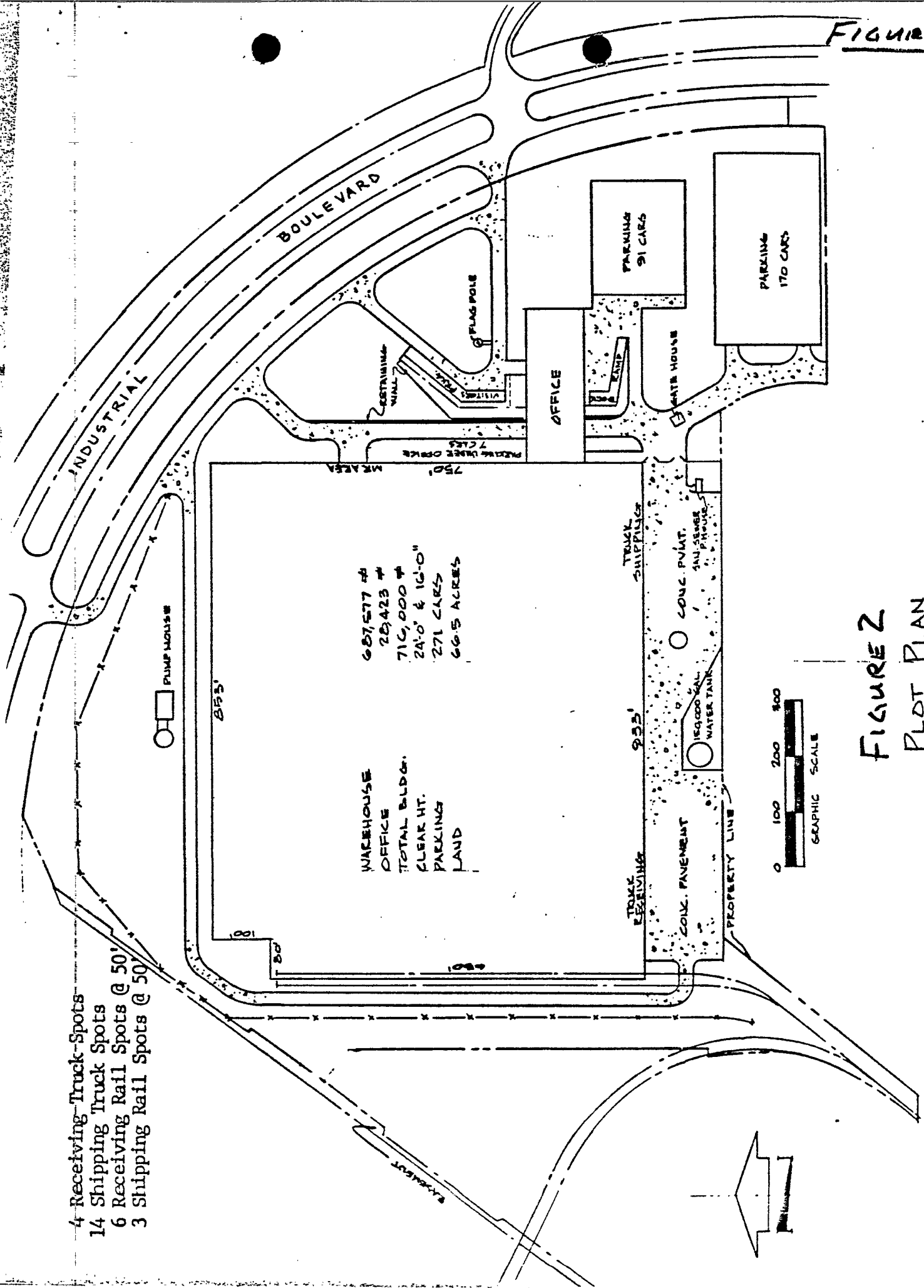
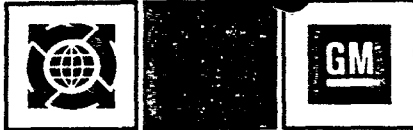


FIGURE 2
PLOT PLAN

G.M. PARTS DIVISION-ATLANTA, GA. #08



Warehousing & Distribution
Division of General Motors Corporation

November 11, 1983

RECEIVED

NOV 18 1983

Georgia Department of Natural Resources
Environmental Protection Division
270 Washington Street, S.W.
Atlanta, GA 30334

ENVIRONMENTAL PROTECTION DIVISION
LAND PROTECTION BRANCH

RE: EPA #GAD000814343 - Doraville
Changes of Status to Small Quantity Generator

Dear Mr. Laros:

Enclosed, please find a revised copy of page 3 of 5 of the Part A RCRA application. At this time we are requesting deletion of the original listed wastes and quantities. These wastes were originally listed due to a misunderstanding of the regulations.

General Motors Warehousing and Distribution Division hereby requests that the status of the above referenced facility be changed from full TSDF to Small Quantity Generator. In addition, we request that we retain our EPA ID number for future use should the nature of our operations change.

If I can be of further assistance, please contact me at 313-635-6614.

Sincerely,

B. B. SORCHEICH
Environmental Control
Facilities and Planning

BBS/sm
Enclsoure

EPA I.D. NUMBER (enter from page 1)										FOR OFFICIAL USE ONLY																																							
W 6 A D 0 0 0 8 1 4 3 4 3										W DUP																																							
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100										1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100																																							
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)										D. PROCESSES																																							
A. EPA HAZARD. WASTE NO. (enter code)										B. ESTIMATED ANNUAL QUANTITY OF WASTE										C. UNIT OF MEASURE (enter code)										1. PROCESS CODES (enter)										2. PROCESS DESCRIPTION (if a code is not entered in D(1))									
1 D001										22000										P										S01										Incl. Above									
2 D002																																																	
3																																																	
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FORM 1 GENERAL		U.S. ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION <i>Consolidated Permit Program</i> <small>(Read the "General Instructions" before starting.)</small>		1. EPA I.D. NUMBER F G A D 0 0 0 8 1 4 3 4	
LABEL ITEMS I. EPA I.D. NUMBER III. FACILITY NAME V. FACILITY MAILING ADDRESS VI. FACILITY LOCATION		0 0 1 3 4 5 ATTACHMENT 1 P6 3059 RECEIVED PLEASE PLACE LABEL IN THIS SPACE		GENERAL INSTRUCTIONS If a preprinted label has been provided in the designated space, review the information carefully; if any of it is incorrect, through it and enter the correct data in the appropriate fill-in area below. Also, if the preprinted data is absent (the area left of the label space lists the information that should appear), please provide proper fill-in area(s) below. If the information is complete and correct, you need not complete items I, III, V, and VI (except VI must be completed regardless). Complete items if no label has been provided. See the instructions for detailed instructions and for the legal authorization under which this data is collected.	
II. POLLUTANT CHARACTERISTICS INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any of the questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If your answer "no" to each question, you need not submit any of these forms. You may answer "no" if your facility is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.					
SPECIFIC QUESTIONS		MARK "X"		SPECIFIC QUESTIONS	
YES		NO		FORM ATTACHED	
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)		X		F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production; inject fluids used for enhanced recovery of oil or natural gas; or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)	
III. NAME OF FACILITY GMC WHS. & DISTRIBUTION DIV. - ATLANTA					
IV. FACILITY CONTACT A. NAME & TITLE (last, first, & title) DAWSON WAYNE SR. ENGINEER B. PHONE (area code & no.) 313 635 5474					
V. FACILITY MAILING ADDRESS A. STREET OR P.O. BOX 6060 W. BRISTOL RD. B. CITY OR TOWN FLINT C. STATE MI D. ZIP CODE 48554					
VI. FACILITY LOCATION A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER 4060 MOTORS INDUSTRIAL WAY B. COUNTY NAME DEKALB C. CITY OR TOWN KALAMAZOO D. STATE MI E. ZIP CODE 30360 F. COUNTY CODE (if known)					

CONTINUED FROM THE FRONT

ATTACHMENT I PG 40F9

VII. SIC CODES (4-digit, in order of priority)

A. FIRST										B. SECOND											
7	5	0	1	3	(specify)	STORAGE - AUTO PARTS					7					(specify)					
C. THIRD										D. FOURTH											
7					(specify)						7					(specify)					

VIII. OPERATOR INFORMATION

A. NAME																									B. Is the name listed in Item VIII-A also the owner?										
8	G	M	C	W	H	S	G	.	&	D	I	S	T	R	I	B	U	T	I	O	N	D	I	V	.	F	L	I	N	T	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				

C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)

F = FEDERAL M = PUBLIC (other than federal or state)
 S = STATE O = OTHER (specify) **P** (specify)
 P = PRIVATE

D. PHONE (area code & no.)

313 **635** **5474**

E. STREET OR P.O. BOX

6060 W. BRISTOL ROAD

F. CITY OR TOWN

FLINT

G. STATE

MI

H. ZIP CODE

48554

IX. INDIAN LAND

Is the facility located on Indian land?
☐ YES ☒ NO

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)										D. PSD (Air Emissions from Proposed Sources)										
9	N				NA	9	P			NA										
B. UIC (Underground Injection of Fluids)										E. OTHER (specify)										
9	U				NA	9				NA	(specify)									
C. RCRA (Hazardous Wastes)										F. OTHER (specify)										
9	R				NA	9				NA	(specify)									

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility; the location of each of its existing and proposed intake and discharge structures; each of its hazardous waste treatment, storage, or disposal facilities; and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

FACILITY UTILIZATION IS PRIMARILY FOR STORAGE AND WHOLESALE DISTRIBUTION OF MOTOR VEHICLE PARTS AND ACCESSORIES.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that this information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

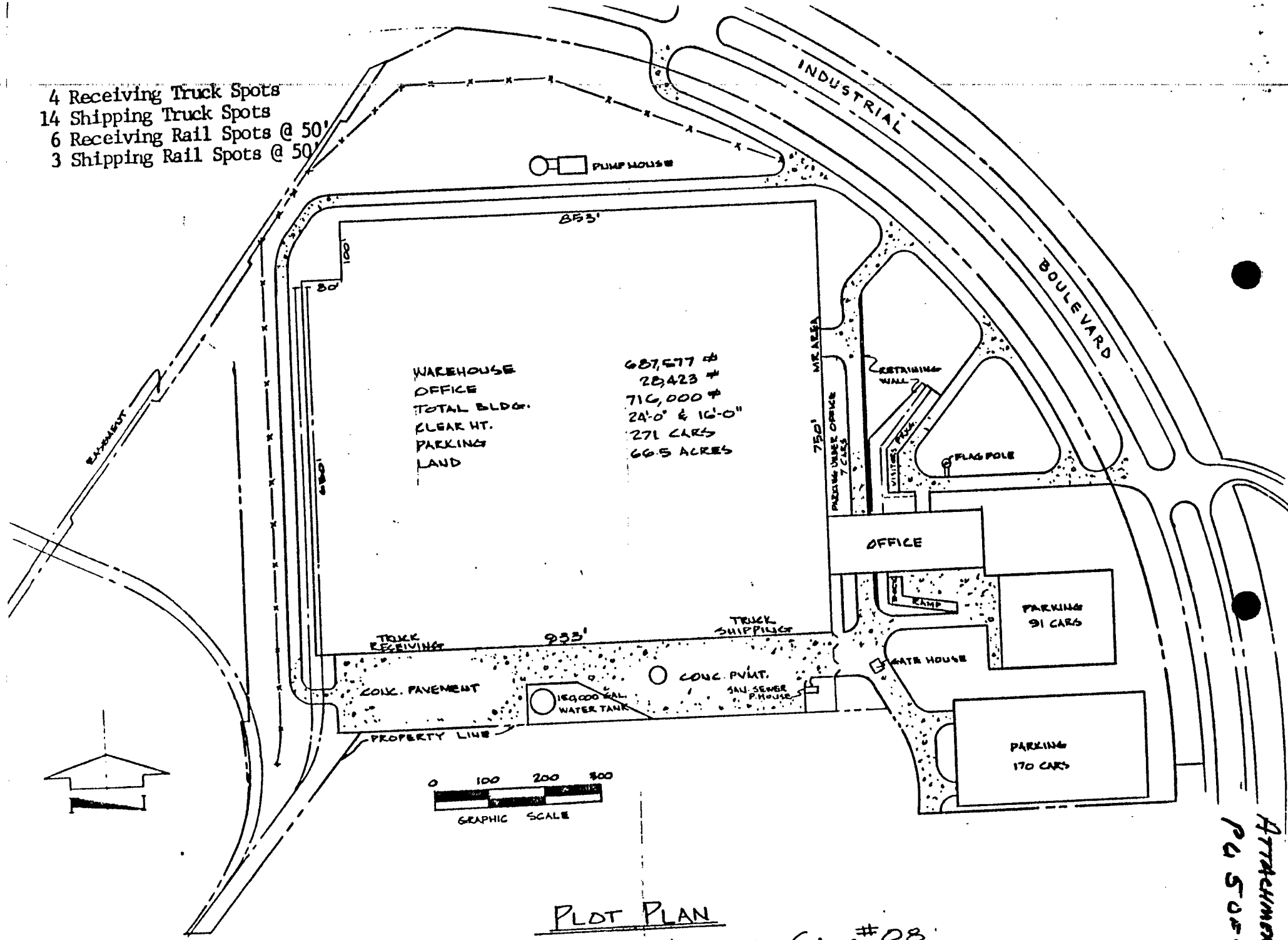
A. NAME & OFFICIAL TITLE (type or print)

B. SIGNATURE

C. DATE SIGNED

COMMENTS FOR OFFICIAL USE ONLY

- 4 Receiving Truck Spots
- 14 Shipping Truck Spots
- 6 Receiving Rail Spots @ 50'
- 3 Shipping Rail Spots @ 50'



PLOT PLAN
G.M. PARTS DIVISION-ATLANTA, GA. #08

ATTACHMENT 1
PC 5059

FORM 3 RCRA		U.S. ENVIRONMENTAL PROTECTION AGENCY HAZARDOUS WASTE PERMIT APPLICATION <i>Consolidated Permits Program</i> (This information is required under Section 3005 of RCRA.)	I. EPA I.D. NUMBER																																				
			<table border="1"> <tr> <td>8</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td>F</td><td>G</td><td>A</td><td>D</td><td>0</td><td>0</td><td>0</td><td>8</td><td>1</td><td>4</td><td>3</td><td>9</td><td>3</td><td></td> </tr> </table>												8														F	G	A	D	0	0	0	8	1	4	3
8																																							
F	G	A	D	0	0	0	8	1	4	3	9	3																											

FOR OFFICIAL USE ONLY

APPLICATION APPROVED			DATE RECEIVED (yr. mo., & day)			
23			24	-		28

COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (*mark one box only*) to indicate whether this is the first application you are submitting for your facility, or revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)

- ☒ 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)

- ☐ 2. NEW FACILITY (Complete item below.)

C	YR.	MO.	DAY
8	73	01	01
15	73 74	75 76	77 78

**FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day)
OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED
(use the boxes to the left)**

YR.		MO.		DAY	
73	74	75	76	77	78

FOR NEW FACILITIES
PROVIDE THE DATE
(yr., mo., & day) OPER-
TION BEGAN OR IS
EXPECTED TO BEG

B. REVISED APPLICATION (place an "X" below and complete Item I above)

- ☐ 1. FACILITY HAS INTERIM STATUS

- ☐ 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES – CODES AND DESIGN CAPACITIES

A. **PROCESS CODE** — Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, the describe the process (*including its design capacity*) in the space provided on the form (*Item III-C*).

B. PROCESS DESIGN CAPACITY — For each code entered in column A enter the capacity of the process.

1. **AMOUNT** — Enter the amount.
2. **UNIT OF MEASURE** — For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS	PRO- CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	PROCESS	PRO- CESS CODE	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY	
Storage:			Treatment:			
CONTAINER (barrel, drum, etc.)	S01	GALLONS OR LITERS	TANK	T01	GALLONS PER DAY OR LITERS PER DAY	
TANK	S02	GALLONS OR LITERS	SURFACE IMPOUNDMENT.	T02	GALLONS PER DAY OR LITERS PER DAY	
WASTE PILE	S03	CUBIC YARDS OR CUBIC METERS		T03	TONS PER HOUR OR METRIC TONS PER HOUR; GALLONS PER HOUR OR LITERS PER HOUR	
SURFACE IMPOUNDMENT	S04	GALLONS OR LITERS	INCINERATOR	OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or inciner- ators. Describe the processes in the space provided; Item III-C.)	T04	GALLONS PER DAY OR LITERS PER DAY
Disposal:						
INJECTION WELL	D79	GALLONS OR LITERS				
LANDFILL	D80	ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER				
LAND APPLICATION	D81	ACRES OR HECTARES				
OCEAN DISPOSAL	D82	GALLONS PER DAY OR LITERS PER DAY				
SURFACE IMPOUNDMENT	D83	GALLONS OR LITERS				
UNIT OF MEASURE CODE			UNIT OF MEASURE CODE			
GALLONS	G	LITERS PER DAY	V	ACRE-FEET		
LITERS	L	TONS PER HOUR	D	HECTARE-METER		
CUBIC YARDS	Y	METRIC TONS PER HOUR	W	ACRES		
CUBIC METERS	C	GALLONS PER HOUR	E	HECTARES		
GALLONS PER DAY	U	LITERS PER HOUR	N			

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

[illegible]

ATLANTA

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

ATTACHMENT 1

PL 70F9

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE
POUNDS.....	P
TONS.....	T

METRIC UNIT OF MEASURE	CODE
KILOGRAMS.....	K
METRIC TONS.....	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous waste: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO. X-1 X-2 X-3 X-4	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES			
				1. PROCESS CODES (enter)		2. PROCESS DESCRIPTION (if a code is not entered in D(1))	
X-1	K 0 5 4	900	P	T 0 3	D 8 0		
X-2	D 0 0 2	400	P	T 0 3	D 8 0		
X-3	D 0 0 1	100	P	T 0 3	D 8 0		
X-4	D 0 0 2						included with above

[illegible]

V. DESCRIPTION OF HAZARDOUS WASTES (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

ATTACHMENT I

Pg 90F9

EPA I.D. NO. (enter from page 1)											
G	A	D	0	0	0	8	1	4	3	4	3
TIME											
6											

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)	LONGITUDE (degrees, minutes, & seconds)
33 54 32 N	084 17 15 W

VIII. FACILITY OWNER

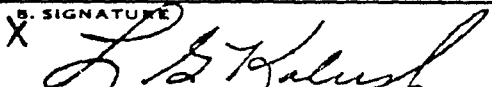
☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER				2. PHONE NO. (area code & no.)			
3. STREET OR P.O. BOX		4. CITY OR TOWN		5. ST.		6. ZIP CODE	

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED
		

X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)	B. SIGNATURE	C. DATE SIGNED

ENVIRONMENTAL PROTECTION AGENCY GENERATOR ANNUAL HAZARDOUS WASTE REPORT

This report is for the calendar year ending December 31, 1982

RECEIVED

AFFIX LABEL HERE

GENERAL INSTRUCTIONS: If you received a preprinted label attached to the mailing envelope in which this form was enclosed, affix it in the space provided. If any of the information on the label is incorrect, draw a line through it and provide the correct information in the appropriate section below. If the information is correct and complete, leave sections I, II, and III below blank. If you did not receive a preprinted label, complete all sections. REFER TO THE SPECIFIC INSTRUCTIONS CONTAINED IN THIS BOOKLET BEFORE COMPLETING THIS FORM. The information requested in this report is required by law (Section 3002 of the Resource Conservation Recovery Act).

Please print/type with elite type (12 characters per inch)

I. GENERATOR'S EPA I.D. NUMBER

T/A C

GA 10101018114343
1 2 13 14 15

II. NAME OF INSTALLATION

GA WHISIG & DIST. DIV - ATLANTA
30 69

III. INSTALLATION MAILING ADDRESS

6060 W BRISTOL RD
15 16 45

Street or P.O. Box

FLINT MI 48554
15 16 41 42 47 51

City or Town

State Zip Code

IV. LOCATION OF INSTALLATION (if different than section III above)

4060 MOTOR INDUSTRIAL WAY
15 16 45

Street or Route number

DORAVILLE GA 30106
15 16 41 42 47 51

City or Town

State Zip Code

V. INSTALLATION CONTACT

SORCHENICH BERNADIETTC
15 16 45

Name (last and first)

313-635-6614
46 55

Phone No. (area code & no.)

SIC CODE 5013

VI. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

X L.L. Browning Manager-PDC

Print/Type Name

Title

Signature of Authorized Representative

3-1-83

Date Signed

ENVIRONMENTAL PROTECTION AGENCY

Generator Annual Hazardous Waste Report (cont.)

This report is for the calendar year ending December 31, 1982

Date rec'd:

Rec'd by:

VII. GENERATOR'S EPA I.D. NO.

T/A C

EGAD0000814343

IX. FACILITY'S EPA I.D. NO.

EGAD1990740714

VIII. FACILITY NAME (specify facility to which all wastes on this page were shipped)

ARUEC Chemicals, Inc

X. FACILITY ADDRESS

P.O. Box 54
7962 Huey Rd
Douglasville, Ga 30133

XI. TRANSPORTATION SERVICES USED (List the name and EPA identification numbers of all transporters whose services were used during 1982. This section to be completed only once. Do not repeat on supplemental sheets.)

ARUEC Chemicals, Inc GAD990740714

XII. WASTE IDENTIFICATION

Sequence #	Line #	A. Description of Waste	B. DOT Hazard Code	C. EPA Hazardous Waste No. (see instructions)	D. Amount of Waste	E. Unit of Measure
1	1	Waste Solvent	08	F003 F005	9.176	P
2	2	Waste Oil	none	none	1.463	P
3	3					
4	4					
5	5					
6	6					
7	7					
8	8					
9	9					
10	10					
11	11					
12	12					

XIII. COMMENTS (enter information by section number—see instructions)

ENVIRONMENTAL PROTECTION AGENCY

GENERATOR ANNUAL HAZARDOUS WASTE REPORT

This report is for the calendar year ending December 31, 1981.

RECEIVED

MAY 1982

ENVIRONMENTAL PROTECTION DIVISION
LAND PROTECTION BRANCH

Please print/type with elite type (12 characters per inch)

I. GENERATOR'S EPA I.D. NUMBER

T/A C

EGAD000814343

II. NAME OF INSTALLATION

GHI WHSIG 4 DII ST. DIUK-ATLANTA

III. INSTALLATION MAILING ADDRESS

6060 W BRISTOL RD.

Street or P.O. Box

FIIINT

City or Town

HL 48554

State Zip Code

IV. LOCATION OF INSTALLATION (if different than section III above)

4060 MOTOR INDUSTRIAL WAY

Street or Route number

Doraville

City or Town

GA 30060

State Zip Code

V. INSTALLATION CONTACT

Sorechevich Bernadette

Name (last and first)

313-635-6614

Phone No. (area code & no.)

VI. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

L.L. Browning Manager-PDC

Print/Type Name

Title

L.L. Browning

Signature of Authorized Representative

3-1-83

Date Signed

ENVIRONMENTAL PROTECTION AGENCY

Generator Annual Hazardous Waste Report (cont.)

This report is for the calendar year ending December 31, 1981.

VII. GENERATOR'S EPA I.D. NO.

GAD000108114343
1 2 13 14 15

IX. FACILITY'S EPA I.D. NO.

GAD990740714
16 28

VIII. FACILITY NAME (specify facility to which all wastes on this page were shipped)

ARIVEC Chemicals, Inc

X. FACILITY ADDRESS

*P.O. Box 54
7962 Huey Rd
Douglasville, Ga 30133*

XI. TRANSPORTATION SERVICES USED (List the name and EPA identification numbers of all transporters whose services were used during 1981. This section to be completed only once. Do not repeat on supplemental sheets.)

ARIVEC Chemicals, Inc GAD990740714

XII. WASTE IDENTIFICATION

Line	A. Description of Waste	B. DOT Hazard code	C. EPA Hazardous Waste No. (see instructions)	D. Amount of Waste	E. Unit of Measure
1	<i>White Solvents</i>	<i>08</i>	<i>F003 F005</i> 35 38 39 42 46 47 50 51	<i>14430</i>	<i>P</i>
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					

XIII. COMMENTS (enter information by section number—see instructions)



Warehousing & Distribution
Division of General Motors Corporation

December 9, 1983

Georgia Department of Natural Resources
Environmental Protection Division
270 Washington Street, S.W.
Atlanta, GA 30334


RE: EPA #GAD000814343 - Doraville
EPA #GAD000814350 - Chamblee
Change of Status to Small Quantity Generator

General Motors Warehousing and Distribution Division is hereby submitting a request for change in the status of the above referenced facility from full Treatment, Storage, or Disposal Facility (TSDF) to Small Quantity Generator. This change is requested due to a modification in the nature of our operations which now generate waste materials at a rate less than 1000 kilograms per month.

In addition, we are requesting deletion of the original listed wastes. The wastes were initially listed as Commercial Chemical Products ("U" numbers). However subsequent clarification of the definitions in the regulations indicate the wastes should be listed as ignitable and corrosive ("D" numbers) as shown on the enclosed revised page 3 of 5 of the Part A permit application.

Also, at this time, we are requesting that we retain our EPA ID number for future use should the nature of our operations change again.

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.


L. L. BROWNING, PDC Manager
Warehousing and Distribution
Division of General Motors

LLB/sm
Attachments



JOE D. TANNER
Commissioner

J. LEONARD LEDBETTER
Division Director

Attachment 5 PL 1071
Department of Natural Resources

ENVIRONMENTAL PROTECTION DIVISION
270 WASHINGTON STREET, S.W.
ATLANTA, GEORGIA 30334

January 31, 1984

Mr. L. L. Browning, PDC Manager
General Motors Corporation
Warehousing & Distribution
6060 West Bristol Road
Flint, Michigan 48554

FILE COPY

RE: Request for Facility Status
Changes for G.M. Parts Division
Plant, Doraville
EPA ID#GAD00814343

Dear Mr. Browning:

This will acknowledge receipt of your request for withdrawal of your application for a Hazardous Waste Facility permit.

Based on the information provided, withdrawal of your application is warranted and your permit application has been placed in our inactive files.

As requested, your status has been changed to a small quantity generator and your EPA Identification Number has been retained.

Please be advised that withdrawal of your permit application invalidates any variance that you received to continue existing hazardous waste treatment storage or disposal during the permit review process and that based on our concurrence with your withdrawal request, the Federal Environmental Protection Agency will terminate your facility's interim status.

Should you wish to treat, store, or dispose of hazardous waste in the future, it will be necessary that a hazardous waste handling permit be issued, prior to the construction of such facilities, under authority of Section 8 of the Georgia Hazardous Waste Management Act and Section 391-3-11-.10 and .11 of Georgia's Rules for Hazardous Waste Management.

If further clarification is needed on this matter, please feel free to contact Alan Laros at 404/656-7802.

Sincerely,

John D. Taylor, Jr.
Program Manager
Industrial & Hazardous Waste
Management Program

JDT:alb:12
cc: James H. Scarbrough
File: GM Parts Div. (Y)

REGION: 04
STATE : GA

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L I S V 1.2

PAGE: 11
RUN DATE: 04/17/87
RUN TIME: 14:05:50

M.2 - SITE MAINTENANCE FORM

		* ACTION: _	*
EPA ID : GAD000814343			
SITE NAME: GENERAL MOTORS PARTS DIV	SOURCE: H	* _____	*
STREET : 4060 MOTORS INDUSTRIAL WAY	CONG DIST: 04	* _____	*
CITY : DORAVILLE	ZIP: 30360	* _____	*
CNTY NAME: DEKALB	CNTY CODE : 089	* _____	*
LATITUDE : 33/54/32.0	LONGITUDE : 084/17/15.0	* ____/____/____.	*
LL-SOURCE: R	LL-ACCURACY:	* _	*
SMSA : 0520	HYDRO UNIT: 03130001	* _____	*
INVENTORY IND: Y	REMEDIAL IND: Y	REMOVAL IND: N	FED FAC IND: N
NPL IND: N	NPL LISTING DATE:	NPL DELISTING DATE:	
SITE/SPILL IDS:			
RPM NAME:	RPM PHONE: - -	* _____	*
SITE CLASSIFICATION:	SITE APPROACH:	* _	*
DIOXIN TIER:	REG FLD1:	REG FLD2: 6	* _____
RESP TERM: PENDING ()	NO FURTHER ACTION ()	* PENDING ()	NO FURTHER ACTION ()
ENF DISP: NO VIABLE RESP PARTY ()	VOLUNTARY RESPONSE ()	* _	_
ENFORCED RESPONSE ()	COST RECOVERY ()	* _	_
SITE DESCRIPTION:			
WAREHOUSE FOR MOTOR VEHICLE PARTS AND ACCESSORIES. SMALL	* _____		
QUANTITY GENERATOR.	* _____		
	* _____		
	* _____		

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L I S V 1.2

PAGE : 12
RUN DATE : 04/17/87
RUN TIME : 14:05:50

* ACTION: _____

EPA ID: GAD000814343 PROGRAM CODE: H01 PROGRAM TYPE:

✱ _____

3

DESCRIPTION:

✱

*

*

✱

REGION: 04
STATE : GA

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L I S V 1.2

PAGE: 13
RUN DATE: 04/17/87
RUN TIME: 14:05:50

M.2 - EVENT MAINTENANCE FORM

* ACTION: _

SITE: GENERAL MOTORS PARTS DIV
PROGRAM: SITE EVALUATION

EPA ID: GAD000814343 PROGRAM CODE: H01

EVENT TYPE: DS1

FMS CODE: EVENT QUALIFIER :

EVENT LEAD: E

EVENT NAME: DISCOVERY

STATUS:

DESCRIPTION:

* _ _ _ _ _ *

* _ _ _ _ _ *

* _ _ _ _ _ *

* _ _ _ _ _ *

* _ _ _ _ _ *

ORIGINAL

CURRENT

ACTUAL

START:

START:

START:

COMP :

COMP :

COMP : 08/01/80

* _/_/_/ _ _/_/_/ _ _/_/_/ *

* _/_/_/ _ _/_/_/ _ _/_/_/ *

HQ COMMENT:

* _ _ _ _ _ *

RG COMMENT:

* _ _ _ _ _ *

COOP AGR #

AMENDMENT #

STATUS

STATE %

0

* _ _ _ _ _ *

REGION: 04
STATE : GA

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L I S V 1.2

PAGE: 14
RUN DATE: 04/17/87
RUN TIME: 14:05:50

M.2 - EVENT MAINTENANCE FORM

* ACTION: _

SITE: GENERAL MOTORS PARTS DIV
PROGRAM: SITE EVALUATION

EPA ID: GAD000814343 PROGRAM CODE: H01

EVENT TYPE: PA1

FMS CODE: EVENT QUALIFIER :

EVENT LEAD: S

EVENT NAME: PRELIMINARY ASSESSMENT

STATUS:

DESCRIPTION:

* _ _ _ _ _ *

* _ _ _ _ _ *

* _ _ _ _ _ *

* _ _ _ _ _ *

* _ _ _ _ _ *

ORIGINAL

CURRENT

ACTUAL

START:

START:

START: 01/01/85

* _/_/_/ _/_/_/ _/_/_/ *

COMP :

COMP :

COMP : 01/01/85

* _/_/_/ _/_/_/ _/_/_/ *

HQ COMMENT:

* _ _ _ _ _ *

RG COMMENT:

* _ _ _ _ _ *

COOP AGR #

AMENDMENT #

STATUS

STATE %

0

* _ _ _ _ _ *

REGION: 04
STATE : GA

U.S. ENVIRONMENTAL PROTECTION AGENCY
OFFICE OF EMERGENCY AND REMEDIAL RESPONSE
C E R C L I S V 1.2

PAGE: 15
RUN DATE: 04/17/87
RUN TIME: 14:05:50

M.2 - COMMENT MAINTENANCE FORM

SITE: GENERAL MOTORS PARTS DIV

EPA ID: GAD000814343

COM
NO COMMENT

001 PART A- ON FILE

ACTION

*

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*

*

*